

**Hemet Valley Pipe & Supply**  
**1590 Commerce Lane, San Jacinto CA 92583**  
**(951)654-9358 Fax (951)654-4729**  
**Emergency # (951)306-2763**

**CREDIT APPLICATION**

Company Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
\_\_\_\_\_  
Physical Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Business Type:**

Sole Proprietor \_\_\_\_ Partnership \_\_\_\_ Corp. State: \_\_\_\_  
Years in Business: \_\_\_\_ Drivers License # \_\_\_\_\_  
Resale # \_\_\_\_\_ Contractor License # \_\_\_\_\_

**Contact person regarding Purchase Orders and Invoice Payments:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Title: \_\_\_\_\_ Phone # \_\_\_\_\_ Email: \_\_\_\_\_

**Owner or officer of Corporation:**

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_  
Email: \_\_\_\_\_

**Bank Reference Information:**

Bank Name: \_\_\_\_\_ Account # \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

**Trade References:**

1) Company Name: \_\_\_\_\_ 2) Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
3) Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Personal References:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

**Basis on which you pay merchandise bills:**

Discount \_\_\_\_

30 Days \_\_\_\_

60 Days \_\_\_\_

90 Days \_\_\_\_

I agree on all accounts when due all late accounts shall bear interest at the rate of 1½% per month until paid. I agree to pay for seller's attorney fees in the event suit is instituted to collect any sums due. The above information is here with submitted for the purpose of opening and account and I do hereby certify this information to be true.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_\_

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**\*\*\*\* OFFICE USE ONLY \*\*\*\***

Notes on account application: \_\_\_\_\_

Accepted: \_\_\_\_\_

Denied: \_\_\_\_\_

Limit Amount: \$ \_\_\_\_\_

Date: \_\_/\_\_/\_\_\_\_\_

**WARNING**

**SOME PRODUCTS WE SUPPLY MAY CONTAIN LEAD. BY ACCEPTING OUR PRODUCTS YOU CERTIFY THAT THESE PRODUCTS WILL BE INSTALLED IN COMPLIANCE WITH CALIFORNIA AB-1953.**